

PLEDGE FORM

Please complete both sides of this form so we may properly record your gift.



UNITED TODAY, STRONGER TOMORROW

NAME	PREFIX	FIRST	MI	LAST
SPOUSE/ PARTNER'S NAME*	PREFIX	FIRST	MI	LAST
HOME ADDRESS	CITY		STATE	ZIP
DATE OF BIRTH (MM/DD/YY)	SPOUSE/ PARTNER'S DOB (MM/DD/YY)			
PREFERRED PHONE	() - EXT	<input type="checkbox"/> HOME	<input type="checkbox"/> WORK	<input type="checkbox"/> MOBILE <input type="checkbox"/> It is okay to contact me via text message
EMAIL	<input type="checkbox"/> HOME <input type="checkbox"/> WORK	SPOUSE/ PARTNER'S EMAIL	<input type="checkbox"/> HOME <input type="checkbox"/> WORK	
COMPANY	TITLE	<input type="checkbox"/> I AM/WE ARE RETIRED		

United Way of the Midlands would like to recognize first-time donors. Please check the box if you are a new donor of United Way.

Please combine my gift with my spouse/partner's gift.

**Please note if both partners contribute for a combined gift, both should fill out a pledge form.

*Spouse/Partner's Employer

\$ _____
*Spouse/Partner's Annual Contribution Amount

YOUR INVESTMENT MAKES A DIFFERENCE

I CHOOSE TO INVEST IN THE COMMUNITY TO PROVIDE A CIRCLE OF SUPPORT: \$ _____



Your dollars fund more than 100 local nonprofit programs that are addressing pressing social and economic disparities and meeting families' essential needs, such as healthy food, a safe place to go after school and job support.

OPTIONAL - I CHOOSE TO INVEST IN ONE OR MORE OF UNITED WAY'S AREAS OF ESSENTIAL NEEDS:

- | | | |
|--|--|---|
| <input type="checkbox"/> BASIC NEEDS
<ul style="list-style-type: none"> • Access to healthy food • Domestic violence services • Physical and mental health services including medical research • Safe and stable housing • 211 Helpline <p>\$ _____</p> | <input type="checkbox"/> EDUCATION
<ul style="list-style-type: none"> • Early childhood education programs that focus on improving literacy and school attendance • Mentoring • Out-of-school-time programs <p>\$ _____</p> | <input type="checkbox"/> FINANCIAL STABILITY
<ul style="list-style-type: none"> • Asset development • Job training • Omaha Federation of Labor collaboration to support upskilling/reskilling of workforce • Personal finance classes • Post-secondary education support <p>\$ _____</p> |
|--|--|---|

SPECIAL PROGRAMS

- | | | |
|---|----------|---|
| <input type="checkbox"/> I choose to invest in the 211 Helpline | \$ _____ | <p>The 211 Helpline serves people in need across Nebraska and southwest Iowa 24/7. People can reach a helpline specialist to be connected to health and human services such as housing, utilities and food support.</p> <p>Diversity, Equity and Inclusion (DEI) focuses on racial equity and BIPOC populations based on socioeconomic and health outcomes widely disproportional by race.</p> <p>JAG Nebraska is a program focused on helping young people overcome obstacles so they can succeed in the classroom and workplace.</p> <p>Mental Health First Aid (MHFA) is a training program to increase our community's understanding of mental health challenges and reduce barriers to seeking help.</p> |
| <input type="checkbox"/> I choose to invest in DEI | \$ _____ | |
| <input type="checkbox"/> I choose to invest in JAG Nebraska | \$ _____ | |
| <input type="checkbox"/> I choose to invest in Mental Health First Aid | \$ _____ | |

- PLEASE TURN OVER TO COMPLETE THIS FORM -

GET INVOLVED

LEADERS IN GIVING

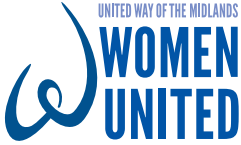


TOCQUEVILLE SOCIETY
\$10,000 minimum donation
 Join this influential group who champions this important work to strengthen and make a lasting impact in our community.



BRIDGEBUILDERS SOCIETY
\$1,000 minimum donation
 Be a trailblazer where your interest and generosity can lead to impactful change for our neighbors.

AFFINITY GROUPS



Mental Health First Aid (MHFA)

Women United is committed to raising awareness of/increasing access to this training to ensure people receive the mental health care they need when they need it.

WOMEN UNITED
\$1,500 minimum donation
 I want to join a dynamic group of women who are passionate and believe in working together to create positive and long-term change and direct my gift toward MHFA training in support of Women United.
AND
 Optional - I choose to direct my dollars to MHFA training in support of Women United.
 \$ _____



JAG Nebraska

By supporting JAG Nebraska, Emerging Leaders aims to help young people overcome obstacles so they can succeed in the classroom and workplace.

EMERGING LEADERS
\$250 minimum donation
 I want to join a thoughtful and enthusiastic group of professionals under the age of 40 who work together to make our community stronger and direct my gift toward JAG Nebraska in support of Emerging Leaders.
AND
 Optional - I choose to direct my dollars to the JAG Nebraska program in support of Emerging Leaders.
 \$ _____

PAYMENT OPTIONS

MY TOTAL ANNUAL GIFT IS: \$ _____

United Way of the Midlands recognizes individuals who generously give at the Bridgebuilder level (\$1,000 or above) by listing their names in our online annual report. Please list my/our name(s) as follows:

_____ I/We would like to remain anonymous.

PAYMENT OPTIONS:

PAYROLL DEDUCTION (Workplace campaigns only) \$ _____ per pay period _____ pay periods = total gift. \$ _____

CASH OR CHECK Please make checks payable to **United Way of the Midlands**. \$ _____

CREDIT CARD Make a secure credit card donation at UnitedWayMidlands.org/donate. \$ _____

STOCKS/SECURITIES For information on giving stocks or securities, visit UnitedWayMidlands.org/stocks. \$ _____
 Approximate date of transfer: (MM/YYYY) ____ / ____

BILL ME (\$25 minimum) \$ _____ START DATE (MM/YYYY) ____ / ____ Monthly Quarterly* One Time \$ _____
 *Billed the first month of each quarter of the calendar year.

I WOULD LIKE TO BE CONTACTED ABOUT LEGACY GIVING AND ENDOWMENT GIVING OPPORTUNITIES

I CHOOSE NOT TO DONATE AT THIS TIME

SIGN AND DATE

SIGNATURE (REQUIRED)

DATE

THANK YOU!

To designate your gift to a specific, approved, 501(c)(3) organization that addresses local health and human services within the counties covered by United Way of the Midlands, or for more information on designations, please visit UnitedWayMidlands.org/Designations.

Privacy Statement: United Way of the Midlands may collect email addresses and other personally identifiable data about donors, volunteers and visitors, when such information is voluntarily submitted. All such information is collected and stored in a manner appropriate to the nature of the data. United Way of the Midlands does not sell or otherwise disclose this information outside the organization, unless it is explicitly requested in writing.

If you have any questions when filling out this form, please contact DE@uwmidlands.org.